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23565 7590 04/07/2009

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Carolyn Di Meglio	(Depositor's name)
<i>Carolyn Di Meglio</i>	
(Signature)	
July 7, 2009	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/646,268	08/22/2003	Mark Marchionni	1094-I-028DIV	9463

TITLE OF INVENTION: METHODS FOR TREATING CONGESTIVE HEART FAILURE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	07/07/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS		07/13/2009 CNGUYEN3 00000026 10646268		
WEN, SHARON X	1644	514-002000		81 FC:2501 02 FC:1504 03 FC:0001	755.00 OP 300.00 OP	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list					
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					1 KLAUBER & JACKSON LLC
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
Acorda Therapeutics, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
Hawthorne, NY 10532

Beth Israel Deaconess Medical Center
The Brigham and Women's Hospital, Inc.

Boston, MA 02115
Boston, MA 02115

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature

Date July 7, 2009

Typed or printed name

Sarah J. Fashena, Ph.D.

Registration No. 57,600

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